

PUTTING THE PIECES TOGETHER

Your 2012 Benefit Enrollment Guide



MIAMI BEACH



YOUR 2012 BENEFIT OPTIONS

The 2012 Annual Open Enrollment period is just around the corner. Now is the time to consider whether your current benefit package still meets your family's health and financial needs now and for the future. In an effort to reach out to each employee and provide updated information on each of the benefit programs provided by the City, we are changing the City's annual open enrollment strategy this year.

The City of Miami Beach has partnered with Univers Workplace Solutions, a national employee benefits enrollment firm, to provide you the opportunity to meet with professional benefits counselors who will explain the benefits available and help you enroll in the coverage that is right for you and your family. During this time, all eligible employees will have the opportunity to review your current benefits, make any necessary changes to your current coverage and/or elect one or all of the new benefit options available. You will learn about the City's benefit programs including the Humana Medical Plans, MetLife Dental Plans, Unum Short-Term Disability and Long-Term Disability Plans and the Hartford Life Insurance Plan you are currently eligible for. In addition, this annual enrollment will introduce you to the new voluntary benefit plans from Trustmark and Colonial Life being made available for the first time at this enrollment.

WHAT'S NEW FOR 2012

THESE VOLUNTARY BENEFIT PLANS WILL BE AVAILABLE FOR FULL-TIME AND PART-TIME EMPLOYEES

- Trustmark Universal Life Plan
- Trustmark Accident Plan
- Trustmark Critical Illness Plan
- Preferred Legal Plan
- US Legal Plan
- Colonial Life Hospital Plan
- Colonial Life Accident Plan

When most people think about financial security they think of long-term benefits such as 457 plans and their pensions. However, it's even more important to protect your household income from unexpected misfortune.

YOUR HEALTH

No piece of your benefit enrollment is more important than your healthcare. Whether visiting the physician of your choice or having the ability to overcome the financial strain of a major illness, a portfolio of health coverage is vital. The City provides eligible employees the option to purchase:

- Medical Insurance
- Dental Insurance

YOUR LIFESTYLE...YOUR FUTURE

No one can predict the future. We give you the resources to protect you from unexpected pitfalls that can threaten your lifestyle today and your plans for the future.

- Supplemental Life Insurance
- Flexible Spending Accounts
- Disability Insurance

WHO IS ELIGIBLE?

All full-time employees are eligible to participate in the City's medical, dental, disability, life and voluntary benefit programs. In addition, you may elect coverage under the City's group health plan for your dependents. Proof of dependency will be required prior to the enrollment of a dependent in the medical or dental plans. Part-time employees are eligible to participate in the new voluntary benefit program. Eligible dependents include your:

- Legal spouse.
- Unmarried child(ren) or stepchild(ren) (stepchild(ren) must reside in your home) to the end of the calendar year in which the child reaches age 26.
- Domestic Partner (to elect domestic partner coverage, your domestic partner must be registered with Human Resources, Employee Benefits).

Proof of dependency includes your marriage certificate or marriage licenses, birth certificate, adoption certificate, court ordered guardianship, or a copy of your divorce decree indicating you are the parent responsible for group health coverage. Under no circumstances shall a dependent mean a grandchild, great-grandchild or an emancipated minor including where the grandchild, great-grandchild or emancipated minor meets all of the qualifications of a dependent as determined by the Internal Revenue Service (IRS).

NOTE: This statement is intended to summarize the benefits you receive from the City. The actual determination of your benefits is based solely on the plan documents provided by the carrier of each plan. This summary is not legally binding, is not a contract, and does not alter any original plan documents. For additional information, please contact the Human Resources Department.



VISION & DENTAL



VISION- MUST PARTICIPATE IN ONE OF THE CITY'S MEDICAL PLANS

EYEMED Select Vision		
	Eyemed Select Network	Out-of-Network
Exam with dilation as necessary	\$0 (limited to one per year)	Up to \$28
Contact Lenses Fit and Follow-up		
Standard	\$0	Up to \$40
Premium	10% off retail price, then apply \$40 allowance	
Frames (limit one per year)	\$75 allowance, then 20% discount	Up to \$38
Standard Plastic Lenses	Limited to once a year	
Single Vision	\$10	Up to \$18
Bifocal	\$10	Up to \$32
Trifocal	\$10	Up to \$56
Standard Progressive	\$10	Up to \$77
Premium Progressive	10 then 80% of charge - less \$120 allowance	Up to \$77
Lenticular	\$10	Up to \$66
Contact Lenses	Limited to once a year	
Conventional	\$150 allowance, 15% off remaining balance	Up to \$120
Disposables	\$150 allowance	Up to \$120
Medically Necessary	\$0	Up to \$200
Carrier Website	www.eyemedvisioncare.com	
Carrier Toll Free Number	1-866-299-1358	

DENTAL (NOT AVAILABLE TO MEMBERS OF THE IAFF AND PART-TIME EMPLOYEES)

MetLife			
	DHMO	PPO	
	In-Network	In-Network	Out-of-Network
Benefit Description	Must use participating providers. Plan pays 100% after fixed copayment for service.	Must use participating providers. Plan payment is based on provider's reduced contracted fees.	Your choice of licensed dental care providers. Plan payment is based on reasonable and customary allowances.
Calendar Year Maximum Benefit	None	\$2,000 per participant	\$2,000 per participant
Annual Deductible (Individual/Family)	None	\$50 / \$150	\$50 / \$150
Preventive Care (no deductible)	No copay	Covered at 100%	Covered at 100%
Basic Services	Copay Schedule	80% after deductible	80% after deductible
Fillings	\$30	80% after deductible	80% after deductible
Periodontics	Fixed copay - Schedule	80% after deductible	80% after deductible
Endodontics	Fixed copay - Schedule	80% after deductible	80% after deductible
Major Services	Fixed copay - Schedule	50% after deductible	50% after deductible
Orthodontics (adults and children)	\$1,695 copay	50%	50%
Carrier Website (DHMO)	www.safeguard.net / 1-800-880-1800		
Carrier Website (PPO)	www.metlife.com / 1-800-942-0854		



MEDICAL BENEFITS

We understand that everyone's health care needs are different. That's why we offer multiple options so that you can choose the coverage level best-suited to your family's needs. (Not available to members of the FOP, IAFF and Part-Time employees)

Humana				
	HMO		POS	
	Premium	Standard	In-Network	Out-of Network
Benefit Description	Referrals required, must use participating providers	No referrals needed, must use participating providers	Must use participating providers, referrals needed	Non-Participating providers
Lifetime Maximum Benefit	Unlimited	Unlimited	Unlimited	
Annual Deductible (Individual/Family)	None	None	N/A	\$400 / \$800
Out-of-Pocket Maximums (Individual/Family)	–	–	None	\$2,500 / \$5,000
Co-Payment Annual Maximums (Individual / Family)	\$1,500 / \$3,000	\$1,500 / \$3,000	–	–
Preventive Services	100%	100%	100%	(D) then 70%
Physician's Office Visit (PCP)	\$5 copay	\$25 copay	\$5 copay	(D) then 70%
Specialist's Office Visit	No copay	\$40 copay	\$5 copay	(D) then 70%
Other Services				
Emergency Room	\$25 copay in service area or, the lesser of \$50 or 25% of reasonable cost outside of area	\$200 copay per visit	\$50 copay per visit	\$50 copay per visit
Ambulance Service / Emergency only	100%	100%	100%	100%
Inpatient Services	100% after \$100 copay	100% after \$300/day copay (first 5 days)	100% after \$100 per/adm	70% after (D) \$500 per/adm
Outpatient Diagnostic Services	No copay	\$200 copay	No copay	(D) then 70%
Outpatient Surgery	No copay	\$200 copay	No copay	(D) then 70%
Urgent Care Services	\$25 copay	\$40 copay	\$5 then 100%	(D) then 70%
Chiropractic Services	\$5 copay	\$25 copay	\$5 then 100%	(D) then 70%
Mental Health Services				
Coverages	Treated as any other illness: All copays and deductibles apply			
Substance Abuse Services				
Inpatient	Treated as any other illness: All copays and deductibles apply			
Prescription Drugs				
At Pharmacy - 30 day supply				
Generic	\$5 copay	\$7 copay	\$ 10 copay	Not Covered
Formulary	\$5 copay	\$40 copay	\$10 copay*	
Name Brand	\$5 copay	\$60 copay	* Generics provided when available	
Mail Order - 90 day supply				
Generic	\$15 copay	\$14 copay	\$30 copay	Not Covered
Formulary	\$15 copay	\$80 copay	\$30 copay*	
Name Brand	\$15 copay	\$120 copay	* Generics provided when available	
Carrier Website	www.humana.com			
Carrier Toll Free Number	1-888-357-6767			

MEDICAL BENEFITS



Humana				
	PPO			
	Premium		Standard	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Benefit Description	Participating Providers	Non-Participating Providers	Participating providers	Non-Participating providers
Lifetime Maximum Benefit	Unlimited	Unlimited	Unlimited	Unlimited
Annual Deductible (Individual/Family)	\$200 / \$600	\$200 / \$600	\$500 / \$1,500	\$500 / \$1,500
Out-of-Pocket Maximums (Individual/Family)	\$1,000 / \$3,000	\$1,000 / \$3,000	\$3,500 / \$10,500	\$7,000 / \$21,000
Co-Payment Annual Maximums (Individual / Family)	–	–	–	–
Physician's Office Visit (PCP)	\$10 copay	(D) then 80%	\$35 copay	(D) then 70%
Specialist's Office Visit	\$10 copay	(D) then 80%	\$35 copay	(D) then 70%
Other Services				
Emergency Room	90% after \$25 ¹	90% after \$25 ¹	80% after \$200 ¹	80% after \$200 ¹
Ambulance Service / Emergency only	(D) then 80%	(D) then 80%	80% after \$100 ¹	80% after \$100 ¹
Inpatient Services	90% after \$100 ¹	(D) then 70% after \$500 ¹	(D) then 80%	(D) then 60%
Outpatient Diagnostic Services	90% after \$25 ¹	(D) then 70% after \$100 ¹	(D) then 80%	(D) then 60%
Outpatient Surgery	90% after \$100 ¹	(D) then 70% after \$500 ¹	(D) then 80%	(D) then 60%
X-Ray/Lab Tests	\$25 / 90% Facility or, 100% Physician Office	(D) copay and coinsurance	(D) / 80% Facility or 100% Physician Office	(D) coinsurance
Urgent Care Services	\$10 then 100%	(D) then 80%	\$35 then 100%	(D) then 70%
Chiropractic Services	\$10 copayment	(D) coinsurance	\$35 copayment	(D) then 70%
¹ per admission (D) Deductible				
Mental Health Services				
Coverages	Treated as any other illness: All copays and deductibles apply			
Substance Abuse Services				
Inpatient	Treated as any other illness: All copays and deductibles apply			
Prescription Drugs				
At Pharmacy - 30 day supply				
Generic Formulary Name Brand	\$10 copay \$10 copay* \$10 copay*	Not Covered Not Covered	\$ 10 copay \$40 copay* \$60 copay* * Generics provided when available	70% after copay + cost difference generic & brand
Mail Order - 90 day supply				
Generic Formulary Name Brand	\$30 copay \$30 copay* \$30 copay*	Not Covered Not Covered	\$30 copay \$120 copay \$180 copay * Generics provided when available	70% after copay + cost difference generic & brand
Carrier Website	www.humana.com			
Carrier Toll Free Number	1-888-357-6767			



LIFE INSURANCE

HARTFORD LIFE: 1-800-426-6438

No one likes to think of the scenario where you are no longer there for your family. However, you do need to ensure their lives and dreams can continue if the worst does happen. To help you plan, the following life insurance options are available.

BASIC LIFE AND AD&D (NOT AVAILABLE TO MEMBERS OF THE FOP AND PART-TIME EMPLOYEES)

Basic Term Life: To ensure that all employees have a basic level of life insurance protection, you are automatically enrolled in Basic Life Insurance. The City's Basic Life Insurance plan provides a benefit equal to your annual salary rounded to the next highest thousand dollars of coverage. The City pays 50% of the premium and you pay 50%.

Accidental Death & Dismemberment: Accidental Death and Dismemberment is a plan that pays additional benefits if the cause of your death is due to a non-work-related accident. This benefit pays in addition to your Basic Life Insurance coverage. You are automatically enrolled in the City's Basic AD&D Plan. The City pays the full premium cost for this coverage. The plan provides you with a benefit of 50% of your Basic Life Insurance coverage to a maximum benefit of \$20,000 in the event of your death due to a non-work related accident.

SUPPLEMENTAL LIFE AND AD&D (NOT AVAILABLE TO PART-TIME EMPLOYEES)

Employee Coverage: You may also choose to purchase supplemental life insurance coverage in addition to the Basic Life benefit. This plan provides term life and AD&D coverage in a lump sum equal to one, two, three, four or five times your annual base pay rounded to the next highest thousand. The cost of Supplemental Life Insurance depends on the option you choose, your annual salary and your age. You pay the total cost of this benefit through convenient payroll deduction. Increases in coverage are subject to insurance carrier approval.

Dependent Coverage: You may purchase term life coverage for your spouse and/or dependent children. Coverage is "bundled" meaning your purchase is based on the coverage level requested for a spouse, which includes coverage in the amount of \$10,000 for each of your dependent children. If you do not have a spouse, but want to purchase life insurance coverage for your dependent child(ren) your only option would be to elect \$20,000 in spouse coverage which will provide a \$10,000 benefit for each of your dependent children. Spouse coverage is limited to 50% of your Supplemental Life Insurance election. Increases in coverage are subject to insurance carrier approval.

HOW MUCH LIFE INSURANCE DO YOU NEED?

Many financial experts recommend you have at least five to eight times your household income in life insurance. To calculate the level sufficient to cover your needs, you should consider your current income and how much it costs to maintain your family's standard of living. You should also consider your current expenses and your family's future financial needs such as the following:

Current Expenses

- Home Mortgage
- Car Payments
- Credit Card Debt
- Other Debt

Future Needs

- Child Care
- College Tuition
- Spouse's Retirement
- Routine Household Expenses

After you add your financial responsibilities you should determine how your current coverage compares with your family's financial needs and plan accordingly.

DISABILITY INSURANCE

UNUM: 1-877-217-5495



An injury or illness that keeps you out of work could have a devastating impact on your income, jeopardizing your ability to cover normal household expenses. With the right disability insurance, your income is protected, relieving you of the anxiety of depleting your savings to pay your everyday expenses.

To help you prepare for the unexpected, the City provides you with the option to purchase disability coverage. Because different people need different types of protection, two disability plan options are available. Increases in coverage are subject to insurance carrier approval.

SHORT TERM DISABILITY INSURANCE (NOT AVAILABLE TO PART-TIME EMPLOYEES)

Short term disability insurance replaces a portion of your weekly income based on your base earnings. Should you become unable to perform the duties of your position due to an illness or injury that is not work related, the plan replaces 60% of your pre-disability earnings to a maximum weekly benefit of \$1,500 for an approved disability. Payments begin after you have been disabled for a period of fourteen (14) consecutive calendar days, including Saturday and Sunday, and continue for a period of up to 26 weeks, provided you are unable to return to work.

You are considered disabled if you have an illness, pregnancy or accidental injury and you are unable to perform the duties of your position. You must be receiving the appropriate care from a physician on a continuing basis, your physician must certify that you are unable to return to work and your claim has been approved by Unum, the plan carrier, in order to receive payment. The plan has a 12 month pre-existing condition exclusion for any illness or injury for which you have received medical treatment, consultation, care or services including diagnostic measures, or took prescribed drugs or medicines in the 3 months prior to plan coverage.

LONG TERM DISABILITY INSURANCE (NOT AVAILABLE TO PART-TIME EMPLOYEES)

This plan replaces 60% of your pre-disability earnings to a maximum monthly benefit of \$10,000, for an approved disability. If you have been unable to work for a period of 26 weeks or more, Long Term Disability helps replace your income if you are still unable to work. You are considered disabled if you have an illness, pregnancy or accidental injury and you are unable to perform the duties of your position. You must be receiving the appropriate care from a physician on a continuing basis and your physician must certify that you are unable to return to work.

Coverage under the plan is provided until you are able to return to work, reach age 65 or until your death. In addition, the long term disability plan provides training and job placement opportunities should you be unable to perform the duties of the job held prior to your illness or injury. The plan has a 12 month pre-existing condition exclusion for any illness or injury for which you have received medical treatment, consultation, care or services including diagnostic measures, or took prescribed drugs or medicines in the 3 months prior to plan coverage.

FACTORS TO CONSIDER

Your Income	When you are ill or injured, your out-of-pocket expenses and lost wages can have a devastating impact on your family's financial well-being. Disability insurance can help cover these expenses and make up for lost wages.
Your Savings	Statistics show that many families today are living paycheck to paycheck. Without additional financial protection, the added expenses due to a disability could deplete your savings very quickly.
Your Future	Without the security of your regular paycheck, it is difficult to set money aside for future expenses like college tuition or retirement funding. With added disability insurance, you will not have to give up your future plans as a result of an extended illness or injury.



FLEXIBLE SPENDING ACCOUNTS

FBMC WAGeworks COMPANY: 1-800-342-8017

WWW.MYFBMC.COM

(NOT AVAILABLE TO PART-TIME EMPLOYEES)

Flexible Spending Accounts (FSA) do more than set aside money for important health or dependent care expenses. They help you reduce your taxes too!

The City offers two types of Flexible Spending Accounts — a Health Care Flexible Spending Account and a Dependent Care Flexible Spending Account. These accounts allow you to set aside pre-tax dollars to pay for certain out-of-pocket health care or dependent care expenses. This plan has a \$4.50 monthly administration fee that the City pays for you.

HOW FLEXIBLE SPENDING ACCOUNTS WORK

- Each year during the open enrollment period, you decide how much to set aside for health care and/or dependent care expenses for the next year.
- Your contributions are deducted from your paycheck on a before-tax basis in equal installments throughout the calendar year.
- It is very important to carefully evaluate your expected eligible expenses for the year as money remaining in the plan at the end of the plan year cannot be refunded.

Plan	Annual Maximum Contribution	Examples of Covered Expenses
Health Care Flexible Spending Account	\$5,000	Copays, deductibles, orthodontia, prescription copays, etc.*
Dependent Care Flexible Spending Account	\$5,000	Day care, nursery school, elder care expenses, etc.*

* See IRS Publications 502 and 503 for a complete list of covered expenses.

“USE IT OR LOSE IT” PROVISION

Remember to calculate your expenses conservatively when making your FSA elections. IRS regulations require that you forfeit any money left in your account after the claims submission deadline.

Please note that these accounts are separate — you may choose to participate in one, both, or neither. You cannot use money from the Health Care FSA to cover expenses eligible under the Dependent Care FSA or vice versa.

Remember:

You must actively re-enroll each year if you wish to participate in the FSAs.

VOLUNTARY PLANS

THESE PLANS ARE AVAILABLE TO ALL
FULL-TIME AND PART-TIME EMPLOYEES



EMPLOYEE ASSISTANCE AND WORK-LIFE PROGRAM (EAP)

Life, relationships, work, money, legal, family, and everyday issues, all can be challenging. Sometimes you need help and guidance coming up with the answers and practical solutions. Your Humana Life Synch Employee Assistance (EAP) and Work-Life Program is here for you and your family any day, anytime. Best of all, The City provides this completely confidential service at no cost to you.

When you call you will talk with a trained professional who will:

- *Ask you about your situation
- *Help you clarify the problem
- *Offer guidance and support
- *Connect you with experts who can help with work-life issues
- *Refer you to a local EAP counselor for up to five face-to-face sessions

Get the guidance you need- any day, anytime @ www.humana.com/eap or 1-866-440-6556.

For Online Information:

1. Enter website listed above
2. Enter user name: miamibeach (all lower case)
3. Enter password: miamibeach (all lower case)

THE CITY PROVIDES YOU WITH TWO OPTIONS FOR LEGAL PLAN COVERAGE.

PREFERRED LEGAL PLAN 305-379-8438 WWW.PREFERREDLEGAL.COM

The Preferred Legal Plan provides an extensive, enhanced, and customer-friendly plan administered through their Miami-based home office, providing access to hundreds of attorneys throughout all areas of Dade and Broward counties. The plan is designed to provide an added measure of security for you and your family.

The plan provides legal assistance for all types of legal services, including divorce, traffic tickets, real estate, loan modification, foreclosure defense, wills, probate, bankruptcy, immigration, credit report issues, child custody and support, identity theft issues, criminal defense, civil litigation, personal injury, landlord-tenant disputes, domestic violence and many other legal issues including free credit repair, free identity theft consultation and restoration, with access 24 hours a day / 7 days a week. In addition, the Preferred Legal Plan provides coverage to your entire household.

US LEGAL PLAN 1-800-356-5297 WWW.INFO@USLEGALSERVICES.NET

The US Legal Services Family Protector plan is a managed benefit, not a referral service, which means in most cases the plan will pay 100% of the attorneys' hourly rate! US Legal is Florida's oldest legal insurance company and has more legal firms available for your use than any other company with coverage available nationwide.

The plan provides legal assistance for consumer law, wills, civil actions, real estate transactions, landlord tenant disputes, traffic violations, personal injury, Chapter 7 bankruptcy, immigration, adoptions and family law (family law services are provided at a discount after 12 hours) and phone and office consultations. Plan access is available 24 hours a day, 7 days a week.



UNIVERSAL LIFE INSURANCE

TRUSTMARK UNIVERSAL LIFE INSURANCE

LET'S FACE IT

Few families are financially prepared for premature death or needing Long Term Care. Yet it may happen and often without warning.

WHAT CAN HELP?

Life insurance is a promise to your family to help protect their future. Trustmark's Universal Life insurance is permanent life insurance that provides a death benefit for your family if something happens to you or your spouse or domestic partner. The death benefit can be used any way you or your family sees fit.

With Trustmark Universal Life, your coverage is fully portable so you can take it with you if you change jobs, retire, or become disabled.

LONG TERM CARE BENEFITS

Universal Life does more than pay a death benefit to your beneficiaries. It provides a Long Term Care (LTC) Insurance Accelerated Death Benefit Rider. This Rider is designed to help supplement the cost of home healthcare, assisted living, adult day care and nursing care when you are chronically ill.

Plan UL.205 is underwritten by Trusmark Insurance Company, Lake Forest, Illinois.

ACCIDENT INSURANCE

TRUSTMARK ACCIDENT INSURANCE

Accident insurance helps protect employees and their families from the high costs of unexpected accidents. Trustmark's Accident insurance includes benefits for initial care, injuries, hospitalization, follow-up care, transportation and lodging to help employees cushion the financial blow of an accident. Trustmark's Accident insurance is Guaranteed Issue, ensuring that all employees can purchase coverage for themselves and their families, and enrolling is easy, since there is no medical underwriting. Coverage for your spouse requires only one disability question to answer.

Coverage Options – Employees may select coverage for themselves as well as their family. Options include:

- Employee
- Employee and Spouse
- Employee and Children
- Employee, Spouse and Children

"Children" includes the employee's naturally born children, adopted children, stepchildren and financially dependent grandchildren.

Plan A-607 is underwritten by Trusmark Insurance Company, Lake Forest, Illinois.

CRITICAL ILLNESS INSURANCE



TRUSTMARK CRITICAL ILLNESS INSURANCE

Very few people are prepared to survive a critical illness. Without even looking at the statistics, you know that a heart attack, stroke, or cancer happen to people every day.

There's a new way to plan for recovery and help protect your lifestyle. It's Critical Illness insurance. Critical Illness insurance provides a substantial cash benefit upon the first diagnosis of a covered condition to help protect you from the associated costs. Your benefit can be used any way you and your family choose, and your benefit is paid in full regardless of any other insurance you may have in force.

It is important you understand the meaning of first diagnosis. First diagnosis means the first time a physician identifies a covered condition from its signs or symptoms. If you've been diagnosed with a covered condition prior to having coverage, you may not be eligible for a benefit.

Covered Illnesses

Heart Attack

Stroke

Major Organ Transplant

End Stage Renal (Kidney) Failure

Coronary Artery Bypass Surgery*

Carcinoma In Situ*

Invasive Cancer

Occupational HIV

Blindness

ALS (Lou Gehrig's Disease)

Paralysis of At Least Two Limbs

PLAN FEATURES

- You do not have to be terminally ill to receive benefits.
- Coverage options are available for your spouse, your children and financially dependent grandchildren.
- A Health Screening Benefit Rider is included, which provides a benefit per insured per calendar year for covered health screening tests.**
- Coverage is portable — you can take your policy with you if you change jobs or retire.

Your enrollment counselor can help you calculate the cost of the benefit, which will vary depending upon factors such as your age, whether you use tobacco, and the dependent coverage you choose.

* The coverage pays 25% of the face amount of the policy once per lifetime for coronary bypass surgery and carcinoma in situ.

**This rider may not be available in all states.

The policy/certificate of coverage or its provisions, as well as covered illnesses, may vary or be unavailable in some states. The policy/certificate of coverage has exclusions and limitations which may affect any benefits payable.

Plan CACI-82001 is underwritten by Trusmark Insurance Company, Lake Forest, Illinois.

CRITICAL ILLNESS FAST FACTS

The need for critical illness insurance may be greater than you think. Consider the following:

- One out of every three people will be diagnosed with cancer (approximately 1,250,000 Americans annually). The five-year survival rate for all cancers is 62%. (American Cancer Society, 2004 Facts and Figures)
- One out of every four people will suffer a heart attack (approximately 1,200,000 Americans annually). Survival rate of a heart attack is 67%. (Heart Disease and Stroke Statistics, 2005 Update, American Heart Association)
- 750,000 Americans will suffer a stroke annually. Survival rate of stroke is 87%. (Heart Disease and Stroke Statistics, 2005 Update, American Heart Association)
- 52% of employees surveyed reported living paycheck to paycheck. (The MetLife Study of Employee Benefit Trends, 2003)
- Nearly one-third of all families caring for a seriously ill family member during a two-year period lost most or all of their savings. (LIMRA Report, 2002, Lump Sum Literature Review)

CONTACT INFORMATION			
Contact	Benefit	Phone Number	Website
Humana	Medical	888-357-6767	www.humana.com
MetLife	PPO Dental	800-942-0854	www.metlife.com
Safeguard DHMO	DHMO Dental	800-880-1800	www.safeguard.net
EyeMed	Vision	866-299-1358	www.eyemedvisioncare.com
The Hartford	Basic/Supplemental/ Dependent Life	877-426-6483	N/A
Unum	Short-Term/Long-Term Disability	877-217-5495	www.unum.com
Fringe Benefits Management Company	Flexible Spending Accounts	800-342-8017	www.myfbmc.com
US Legal	Prepaid Legal	800-356-5297	www.uslegal.com
Preferred Legal	Prepaid Legal	888-577-3476	www.preferredlegal.com
Humana	Employee Assistance Program	866-440-6556	www.humana.com/eap
Nationwide Retirement Solutions • 401(a) Retirement Plan (Plan Code 013-02677) • 457 Deferred Compensation Plan (Plan Code 0036817) • OBRA Plan (Plan Code 0036817002)	Supplemental Retirement Plans	800-772-2182 877-677-3678 877-6777-3678	www.nrsservicecenter.com
ICMA-RC • 401(a) Retirement Plan (Plan Code 303294) • Roth 401 Plan (Plan Code 705588) • 457 Deferred Compensation Plan (Plan Code 109219)	Supplemental Retirement Plans	800-326-7272	www.icmarc.com
City of Miami Beach	Human Resources	305-673-7524	www.miamibeachfl.gov

MIAMIBEACH